

FILED 4R
UNITED STATES DISTRICT COURT
SANTA FE, NEW MEXICO

Name Amity Johnson
950 W. Cordova Rd #117
Santa Fe, NM 87505
Address

MAR 17 2023

MITCHELL R. ELFERS
CLERK

UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF NEW MEXICO

Amity S. Johnson, Plaintiff
(Full Name)

CASE NO. CV 23-224

(To be supplied by the Clerk)

v.

Mitchell Hamline School of Law, Defendant(s)

~~CIVIL RIGHTS COMPLAINT~~
~~PURSUANT TO 42 U.S.C. §1983~~

A. JURISDICTION

- 1) Plaintiff Amity S. Johnson, is a citizen of New Mexico (State)
who presently resides at 950 W. Cordova Rd, #117 (Mailing address or place of confinement)
Santa Fe, NM 87505.
- 2) Defendant Mitchell Hamline School of Law ^{Corporation} is a citizen of
St. Paul, MN 55105, and is employed as
N/A. At the time the claim(s)
(al Position and title, if any)
alleged in this complaint arose, was this defendant acting under color of state law?
Yes No If your answer is "Yes", briefly explain:

- 3) Defendant _____ is a citizen of
(Name of second defendant)
_____, and is employed as
(City, State)
_____. At the time the claim(s)
(Position and title, if any)
alleged in this complaint arose, was this defendant acting under color of state.
Yes No If your answer is "Yes", briefly explain:

(Use the back of this page to furnish the above information for additional defendants.)

- 4) Jurisdiction is invoked pursuant to 28 U.S.C. §1343(3), 42U.S.C. §1983. (If you wish to assert Jurisdiction under different or additional statutes, you may list them below.)

Jurisdiction is invoked pursuant to 28 USC §1331 -
involves federal law.

B. NATURE OF THE CASE

- 1) Briefly state the background of your case.

Torture and murder of self, and family, and friends
with career-ruining nightmares forever.

C. CAUSE OF ACTION

- 1) I allege that the following of my constitutional rights, privileges or immunities have been violated and that the following facts form the basis for my allegations: (If necessary, you may attach up to two additional pages (8 1/2" x 11") to explain any allegation or to list additional supporting facts.

A)(1) Count I:

(2) Supporting Facts: (Include all facts you consider important, including names of persons involved, places and dates. Describe exactly how each defendant is involved. State the facts clearly in your own words without citing legal authority or argument.)

B)(1) Count II:

(2) Supporting Facts:

C)(1) Count III:

(2) Supporting Facts:

D) PREVIOUS LAWSUITS AND ADMINISTRATIVE RELIEF

1) Have you begun other lawsuits in state or federal court dealing with the same facts involved in this action or otherwise relating to the conditions of your imprisonment?

Yes No If your answer is "YES", describe each lawsuit. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline.)

a) Parties to previous lawsuit.

Plaintiffs: _____

Defendants: _____

b) Name of court and docket number:

c) Disposition (for example: Was the case dismissed? Was it appealed? Is it still pending?)

d) Issues raised: _____

- e) Approximate date of filing lawsuit: _____
- f) Approximate date of disposition: _____
- 2) I have previously sought informal or formal relief from the appropriate administrative officials regarding the acts complained of in Part C. Yes No If your answer is "Yes", briefly describe how relief was sought and the results. If your answer is "No," briefly explain why administrative relief was not sought.

E. REQUEST FOR RELIEF

- 1) I believe that I am entitled to the following relief:

Career placement, back pay, retirement, benefits, and opportunities for advancement.

Signature of Attorney (if any)

amily johnson
Signature of Petitioner

Attorney's full address and telephone number.

DECLARATION UNDER PENALTY OF PERJURY

The undersigned declares under penalty of perjury that he is the plaintiff in the above action, that he has read the above complaint and that the information contained therein is true and correct. 28 U.S.C. Sec. 1746. 18 U.S.C. Sec. 1621.

Executed at Santa Fe, NM on March 20 2023
(Location) (Date)

Jamie Johnson

(Signature)

UNITED STATES DISTRICT COURT
for the

Amity S. Johnson

Plaintiff(s)

v.

Civil Action No.

Mitchell Hamline School of Law

Defendant(s)

SUMMONS IN A CIVIL ACTION

To: (*Defendant's name and address*)

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

CLERK OF COURT

Date: _____

Signature of Clerk or Deputy Clerk

Civil Action No. _____

PROOF OF SERVICE***(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))***

This summons for *(name of individual and title, if any)* _____
 was received by me on *(date)* _____.

I personally served the summons on the individual at *(place)* _____

on *(date)* _____ ; or

I left the summons at the individual's residence or usual place of abode with *(name)* _____

, a person of suitable age and discretion who resides there,

on *(date)* _____, and mailed a copy to the individual's last known address; or

I served the summons on *(name of individual)* _____

, who is

designated by law to accept service of process on behalf of *(name of organization)* _____

on *(date)* _____ ; or

I returned the summons unexecuted because _____ ; or

Other *(specify)*: _____

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00 _____.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

Additional information regarding attempted service, etc: